

# HOME VISITATION LEADERSHIP ADVISORY COALITION

Wednesday, September 20, 2017

10:00 am – Noon

OSDH, Eighth Floor

**Room 806**

## **This meeting available via VideoConference!**

*Click link above for VideoConference registration instructions or contact  
OSDH/FSPS for more information (405) 271-7611.*

***MUST register in advance to participate by VideoConference!***

## **Agenda**

*Please bring or forward in advance any related materials, brochures, calendars specific to your program for sharing!*

### **WELCOME**

- Introductions and sharing of program information [Roll Call – by County]
- Announcements – upcoming conferences, community resources, and related discoveries that would benefit other home visitation efforts across the state!

## ***Special Presentations & Updates***

### ○ **Client Privacy and Social Media**

Have you ever wondered...

- If you should post *WHERE* you work on social media?
- If you should “friend” a client on social media?
- If you can respond to a negative social media post about your agency or professional practice?

Social Media continues to change our world view, allowing for increased communication, information sharing and networking. This training will examine the following areas of concern created by social media: 1) what are its effects on patient privacy rights; 2) what standards are in place to protect patient privacy; 3) what are the professional guidelines that should be followed to ensure client privacy remains a top priority; 4) what can it cost you, your agency and your clients if laws, rules and standards are ignored or not followed? --Something for everyone!

**Robert Morey, MHR**

HIPAA Privacy and Security Program Manager (OSDH)

### ○ **parentPRO Data Discussion\***

Feel free to bring your questions and/or needs for reports as all things data will be discussed.

**John Delara, MPH**

Epidemiologist, Community Epidemiology and Evaluation (OSDH)

*\*All participants are welcome to stay for this portion of the agenda although it may only prove relevant to those involved with parentPRO programs.*

### **BUSINESS**

- Old
- New



Future Agenda Items  
Brainstorm possible Speakers

### **ADJOURN**

**2017 – 2018 Calendar Meeting Dates can be found [HERE](#)**

#### **Please Note**

Meetings are from 10:00am to Noon at OSDH, room 806 (8<sup>th</sup> floor), 1000 NE 10<sup>th</sup> St, OKC, OK 73117  
(P) 405.271.7611 (F) 405.271.1011

*\*Every attempt will be made to provide VideoConference capability so this meeting may be attended at a health department in your community although the video conference equipment may only be reserved three months in advance.*

## Home Visitation Leadership Advisory Coalition

**September 20, 2017**

10:00 a.m. to 12:00 p.m.

ODSH Room 806

### ***Minutes***

#### **Central Office Attendance:**

Patti DeMoraes, LCDA  
Dayen Dooley, MCN Project Launch  
LaChez' English, OSDH/FSPS  
Natalia Fernandez, Parent Promise  
Stephanie Hinton OSDH  
Tiffany Holmes, OSDH/FSPS

Yolanda Lucero, OKCPAT  
Robert Morey, OSDH/HIPAA  
Gina Richardson, OSDH/SoonerStart  
Sherie Trice, OSDH/FSPS  
Mindy Turner, Bethany PAT  
Ashley West, NorthCare

#### **VideoConference Attendance:**

**Carter:** Julie Williamson, parentPRO,

**Cleveland:** Lisa Linke, parentPRO PAT; Meg Standefer, parentPRO

**Creek:** Dava Kramer, parentPRO; Kellie Payne, parentPRO; Donnette Widdoes, parentPRO

**Garvin:** Deidra Smith, parentPRO PAT

**Kay:** Jan Justice, parentPRO PAT

**Kiowa:** April Davis, parentPRO PAT; Rebecca Holstead; parentPRO PAT

**Seminole:** Shai Alexander, parentPRO PAT; Tina Johnson, parentPRO PAT

**Tulsa:** Ariane Betancourt, CAP Tulsa; Amanda Burgan, parentPRO; Donna Holladay, parentPRO PAT

**Woods:** Brenda Rose, parentPRO PAT

### **Welcome**

- Introductions and sharing of program information
- Announcements
  - The 2018 - 2019 HVLAC Calendar is now available on the [FSPS website](#)
  - OICA Fall Forum will be November 2, 2017 from 8 am-8pm
    - It will start out at the Oklahoma State Capitol Building and then move to OKC Farmer's Market
  - CLICK Campaign
    - 13,000 caps have been received, 3,000 caps will be shared with Washington D.C.
    - CAP Tulsa has received several Caps and will be sharing them as well
  - parentPRO has a [Facebook Page](#)
    - If you have any events or items to share on Facebook, please email [TiffanyH@health.ok.gov](mailto:TiffanyH@health.ok.gov)
  - Creek County Baby Shower will be September 21, 2017, 6-8pm
    - Location - Salvation Army Boys and Girls Club
    - Collaborated with Creek County Child Abuse Advisory Board
  - Safe Town Domestic Violence Awareness will be October 17, 2017, 8am-5pm
    - CLEET Continuing Ed. Certification available
    - Register deadline - by the September 29, 2017

## Special Updates, Sharing & Presentations

### Client Privacy and Social Media

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- If you can respond to a negative social media post about your agency/professional practice?

Social Media continues to change our world view, allowing for increased communication, information sharing and networking. This training examined the following areas of concern created by social media:

1. What are its effects on patient privacy rights?
2. What standards are in place to protect patient privacy?
3. What are the professional guidelines that should be followed to ensure client privacy remains a top priority?
4. What can it cost you, your agency and your clients if laws, rules and standards are ignored or not followed?

**Robert Morey, MHR:** HIPAA Privacy and Security Program Manager  
Oklahoma State Department of Health

*Please See Attachments*

### parentPRO Data Discussion

- Currently work is being done on CQI, Annual Reports
- John will be providing technical assistance site visits
  - To schedule a visit, please send your available dates to John @ [JuanD@health.ok.gov](mailto:JuanD@health.ok.gov)
  - The goal is to figure out what is working well and what is not with ETO database
- Requirements for CQI
  - January - should be wrapping up and creating storyboards
  - CQI MIECHV - data should be released shortly
- ASQ
  - When you click on the target child it shows siblings names: John will check on this.
- Reports should be easier to use:
  - They can be used from current date? John will see if he can adjust dates
  - John will work on cleaning up reports and will try to add monthly reports
- ETO will soon be releasing notifications/alerts to tell when forms are due

### Updates:

- No new business at this time.

### Upcoming 2018 Meeting Dates

- Wed, March 21, 2018 (OSDH – Room 806 – Video Conference *available*)\*
- Wed, May 16, 2017 (OSDH – Room 806 – Video Conference *may be available*)\*

**Meeting Adjourned at 12:00 pm**

# Client Privacy & Social Media



## Home Visit Bi-Monthly Meeting

9-20-2017

Robert Morey, MHR  
 HIPAA Privacy and Security Program Manager  
 robertxm@health.ok.gov




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### Covering Today

- Social Media Tool
- Top 10 Patient Rights Violations
- Social Media by the Numbers
- Behavior online = Professional Persona
- State Guidelines for Social Media Social Network (SMSN)
- Professional guidelines for SMSN
- Top 10 HHS-OCR Violation – Social Media
- What can we do to improve the privacy of our clients, and yourself in SMSN world?




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## 10 Common Privacy/HIPAA Violations

- 1. Employees Disclosing Information
- 2. Medical Records Mishandling
- 3. Lost or Stolen Devices
- 4. Texting Patient Information
- 5. Social Media
- 6. Employees illegally accessing patient files
- 7. Social Breaches
- 8. Authorization Requirements
- 9. Accessing patient information on home CPU
- 10. Lack of training

2016- MedSafe

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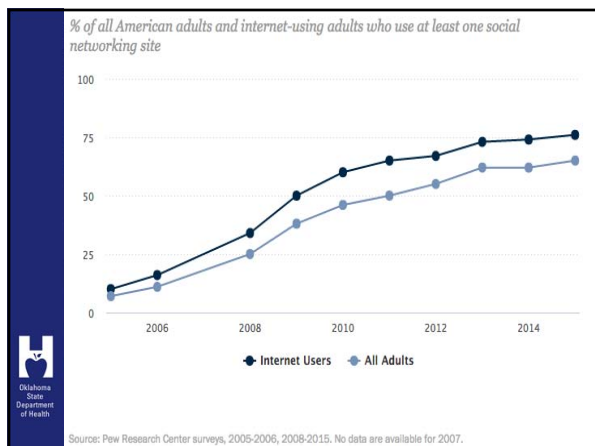
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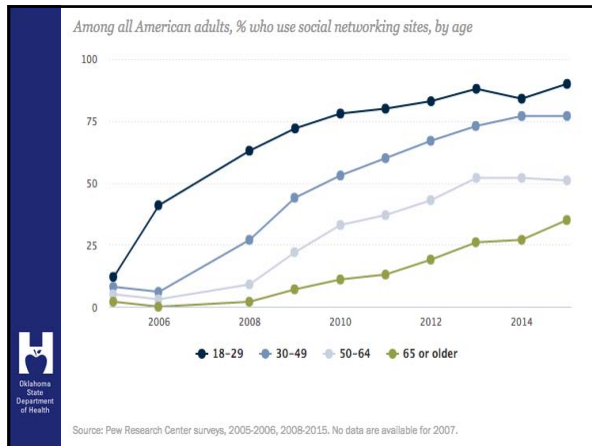
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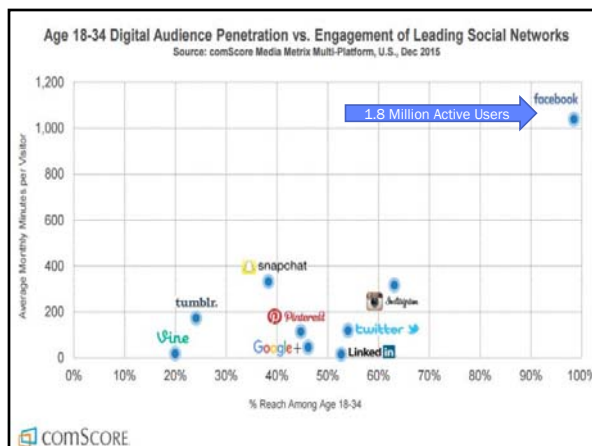
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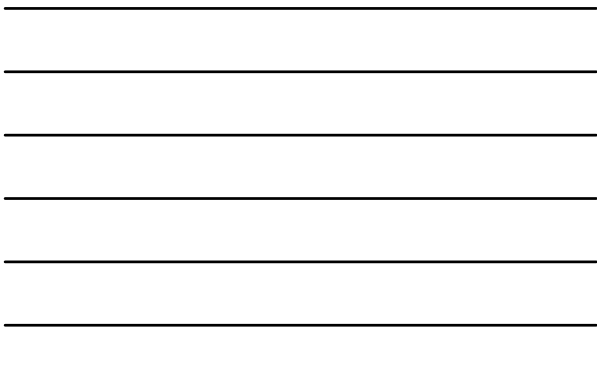
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### Social Media Etiquette for Professional

(American Speech - Language Hearing Association) Steve Ritch and Maggie McGary

- Pick a **Professional Screen Name** – Posting as “HIPPIEChick7 or FratGuy75” may not be the best
- Create a **professional profile** & clean up old info.
- **Don't post anything** you wouldn't want your mother, church, boss, colleagues, or future employers to see
- Keep **Personal and Professional** post separate
- Be nice




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### Social Media Etiquette for Professional

(American Speech - Language Hearing Association) Steve Ritch and Maggie McGary

- Practice **HALT**  
– Never post: **Hungry, Angry, Lonely or Tired**
- Do not send winks, pokes, virtual martinis or invitations for your business contacts to **play online games**
- Do not be a **stalker**
- **Use Spell Check**





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### Agency Policy Social Media

- **Know the policy:** Use established Standards
- State of Oklahoma Social Networking and Social Media **Guidelines**
- State of Oklahoma Social Networking and Social Media **Standards**
- Is My Social Media Post – **Private**?
- Are Social Media records **Discoverable**? (Dallas Photographer)
- Small Violation Cost Big Money




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### Best of OSDH/OMES/State Standards

- 67 O.S. § 203(a) may apply if your social media post is seen as transaction of official business – (AP 4-05(E))
- Never use their OSDH e-mail account or password in conjunction with a personal social networking site
- Additional precautions when posting to personal social networking sites
- Employees who opt to post derogatory, defamatory, or false information may be subject to agency progressive discipline
- Don't use Agency equipment or time for SMSN




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### Should you post where you work?

- AP 4-05, if employees designate in their personal social network page..., the employee is expected to maintain the professionalism...
- OMES, Post a disclaimer as a permanent part of any personal SNSM profile, such as, "The postings on this site are my own and may not necessarily reflect or represent the opinions of my employer."
- Professional Licensing suggest it's not a good idea to post where you work on your personal site because you will be seen as representing the agency.




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### Best of OSDH/OMES/State Standards

- By virtue of their position, they must consider whether published personal content may be misunderstood as expressing an official agency position.
- Agency equipment is subject to monitoring; no expectation of privacy.
- Employees are responsible for all SNSM activity, including postings on the sites of others




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### Best of OSDH/OMES/State Standards

- Ensure personal use of SNSM, including the language and topics of comments and posts, **does not interfere with work commitments and accountabilities**;
- **Never pretend to be someone else or use an anonymous profile**
- Obtain written permission when using agency **logo** on personal SNSM accounts
- Any SNSM activity by an OSDH employee can become **part of an official investigation**




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### Social Media Best Practice Law 360 - Kyna Veatch

- Keep their **personal social media accounts separate** from the practice accounts
- **Avoid "friending" patients and clients**
- Understand that even a **deleted post** can still exist in cyberspace
- Understand that even **posts on a private personal page** can be accessed by users other than friends and followers
- Understand that **HIPAA lists 18 personal identifiers** including photos, neighborhoods, birth dates and vehicle identifiers. All of these must stay private
- Understand that even if a patient posts every last detail about his or her medical issues and treatments, **no medical professional or staff should repost, retweet or "regram"** this information on their personal pages




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### Law 360- Kyna Veatch

- Understand that when they **comment on a patient's page** about illness or treatment, that goes farther than the patient, it goes to all his or her friends as well.
- Understand they do not have the right to **transmit** by electronic media any image of a patient.
- Understand they **do not have the right to take a photo of a patient** on their personal phones.
- Understand they must report any breach of privacy or confidentiality committed by **any fellow employee**.
- Understand they must never post information on personal social media pages as the voice or representative of the agency.
- Be aware that, during **photographable events** like office parties, all patient files or photos must be hidden.




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### Do's and Don'ts of Social Media

- **Do:** Understand what is considered a Privacy violation on Social Networks.
- **Don't:**
  - Posting verbal “**gossip**” about a patient to unauthorized individuals, even if the name is not disclosed.
  - Sharing of photographs, or any form of PHI without **written consent** from a patient.
  - A mistaken belief that **posts are private** or have been deleted when they are still visible to the public.
  - Sharing of seemingly **innocent comments or pictures**, such as a workplace lunch which happens to have **visible patient files** underneath.




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### Do's and Don'ts

- **DON'T:** Post anything you wouldn't **say in an elevator** or **coffee shop**.
- **DO:** Thoroughly train employees
  - Know the **Social Media Policy**/ Privacy Policy
  - Know **BYOD Policy** (AP 3-03)
  - **HIPAA Violations Can cost!**
    - **Civil** \$100 - 1.5 million
    - **Criminal** \$250,000 and up to 10 Years in Prison
    - **Loss of license** or employment


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### Social Media Story

- A **student nurse** moved by her **three-year-old** chemotherapy patient's bravery took a photo of the boy and posted it on her **Facebook** page.
- Even though she **had privacy settings in place**, another nurse not among that student nurse's Facebook friends **came across the post and photo**. This nurse informed the hospital.
- This **HIPAA violation** got the **student nurse expelled** from the nursing program and the **nursing program bounced** off of that hospital's list of accepted schools from which to draw student nurses.

**Even when motivated by the best intentions, HIPAA violations can result in **severe consequences**.**




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### Top 10 Social Media Violation

- Clients Name
- Clients Association to Hospital/Program
- Clients Progress
- Clients Treatment
- Employee Complaints
- Relationship Complaints
- Service Complaints
- Billing Issues (Dallas Plastic Surgeon)
- Pictures of Client
- Pictures of PHI in Background





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### What can we do to Improve Privacy for ourselves, our clients and our agency

- Have and know policy - Training
- Social Media – Security Risk
- Information Security – Effort
- Clients Rights – Document and follow
- Minimum Necessary





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### Information Security

- Phishing (Social media profiling)
- Malware/ Patches – Virus Protection
- Ransomware (IBM Security Review)
- Internet of Things (IOT) – Everything is hooked to the Internet, Smart Home, Smart Device
- “Encryption is our Friend” = USB, Laptop, Cloud Storage, Portable Media, Desk Top?)
- Security Risk Assessment – Action Plan




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## Action Plan (Home and/or office)

- Physical Safeguards:** Facility Security Plan, Media Inventory, Data Storage
- Technical:** Password, Log-in Monitoring, Data Backup Plan, Disaster Recovery Plan
- Administrative:** Policy, Risk Analysis, Staff Training, Encryption


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**Any Other Use or Disclosure of Your PHI Requires Your Written Authorization:**

Under any circumstances other than those listed above, OSDH will ask for your written authorization before we use or disclose your PHI. Specifically, OSDH must obtain your written authorization for the use and disclosure of psychotherapy notes, marketing, and the sale of PHI. OSDH will not sell PHI without your written authorization. You can later cancel your authorization in writing and we will not disclose your PHI after we receive your cancellation, except for disclosures which were processed before we received your cancellation.

**This notice describes how we use and disclose your information. Please review this information carefully.**

**It is the policy of the Oklahoma State Department of Health that all information we receive is confidential. We will only use your Rights:**

**You have the right to:**

- Treatment:** We will share your information with other health care providers who are getting ready to provide care for you. We also share your information with other health care providers who are providing care to you. We also share your information with other health care providers who are providing care to you. We also share your information with other health care providers who are providing care to you.
- Payment:** We may use and disclose your information to bill for services and to receive payment for services.
- Health Care Operations:** We may use and disclose your information to coordinate and manage the care you receive, to improve the quality of care, and to conduct research.

**We can share your information with:**

- Other users or disclosures of:
- If you have given us your written authorization regarding this notice and your rights, or to report any complaints regarding privacy issues, contact:
- When ordered to do so
- When cases of ASDH HPAA Privacy Officer
- Immunization Information Community Health Services
- When business with Oklahoma State Department of Health
- The Immunization Program 1000 NE Tenth Street
- When required by or Oklahoma City, OK 73117-1299
- Order or to prevent 1-800-271-5182
- Report to the Department of Health at [osdh@ok.gov](mailto:osdh@ok.gov) or [www.ok.gov/osdh](http://www.ok.gov/osdh)

**Emergency Coordination:** We may use and disclose your information to coordinate and manage the care you receive, to improve the quality of care, and to conduct research.

**Notice of Privacy Practices**

**OSDH No. 2017-000001**

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**Your Rights**

When it comes to your health information, you have certain rights. This action explains your rights and some of our responsibilities to help you.

**Get an electronic or paper copy of your medical record**

- You can ask us to get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this.
- We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.
- You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how to do this.
- We may say "no" to your request, but we'll tell you why in writing within 60 days.
- You can ask us to contact you in a specific way for example, home or office phone or to send mail to a different address.
- We will say "yes" to all reasonable requests.

**Request confidential communications**

- You can ask us not to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say "no" if it would affect your care.
- If you pay for a service or health care item out of pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say "yes" unless a law requires us to share that information.
- You can ask for a list (accounting) of the times we've shared your health information for six years prior to the date you ask, who we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and we will include disclosures for any you asked us to make. We'll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.
- You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.
- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.
- We will make sure the person has this authority and can act for you before we take any action.
- You can complain if you feel we have violated your rights by contacting us using the information on page 1.
- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-686-6775, or visiting [www.hhs.gov/ohcr/privacy.htm](http://www.hhs.gov/ohcr/privacy.htm).
- We will not retaliate against you for filing a complaint.

**Notice of Privacy Practices**

**OSDH No. 2017-000001**

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## Minimum Necessary Standard

Release the minimum necessary: Limit access to what is needed to accomplish the purpose for which the request was made


Patient's entire medical history



What you actually need



- Minimum necessary standard also applies to you and your co-workers.
  - Right to Know: The amount of PHI you are authorized to access.
  - Need to Know: The amount of PHI that you need to access to complete a particular task.


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